



Suicide In Ireland – Everybody’s Problem

A summary of the Forum for Integration and Partnership of Stakeholders in Suicide Prevention, held at Áras an Uachtaráin, March 2nd, 2005,

Hosted by President *Mary McAleese*.

Rapporteur *Dr. Tony Bates*.



ÁRAS AN UACHTARÁIN
DUBLIN 8

Dear Participant,

May I take this opportunity to thank you for your participation in the Forum held recently at Áras an Uachtaráin to acknowledge the significant contribution of so many individuals and groups in the cause of suicide intervention and prevention.

It was heartening to experience such a generous response to my invitation to the Áras to explore ways in which all those involved can support each other in this vital work.

The Forum concluded on the day with a commitment to collate the proceedings of the meeting in a brief synopsis paper which would be circulated to all those present. I am indeed most grateful to Dr. Tony Bates for his role as rapporteur on this occasion and for his work in putting this summary together.

I look forward to learning more of your endeavours in the months and years ahead. I hope that this initiative will make some contribution, however small, in the search for solutions to this tragic blight on our modern society. It is also my fervent wish that your efforts will be vindicated by the lives you touch and bring comfort to.

Ní neart go chur le chéile - the old Irish saying puts it well; our real strength lies in partnership.

Yours sincerely

Mary McAleese
President of Ireland
May 2005

Suicide in Modern Ireland



Suicide is without doubt one of the saddest events in human experience. It leaves devastation in its wake as relatives, friends and communities struggle with feelings of shock, loss and rejection. The consistently high suicide toll in Ireland over the past 20 years, particularly among young men, has made this cause of death a major public health concern. Disturbing statistics alert us to the reality of the suffering which gives rise to this behaviour, and challenge all of us to consider how we can respond to people so caught up in intense emotional pain that they resort to self-harm.

Suicidal behaviour covers a wide spectrum ranging from passive death wishes, self-injury and self-harm, and behaviour that actually leads to death. No unique factor triggers suicidal behaviour and no single intervention is likely to prevent it. Suicide can result from the build-up of a number of risk factors that harm the relationship between vulnerable individuals and their world. It often results from a loss of place and purpose in life and from a

suffering from which a person believes there is no escape. Suicide isn't "someone else's problem", it's "everybody's problem". An individual dies, but a community is bereft. Effective action to reduce suicidal behaviour requires sustained co-operation and involvement across the whole community.

Making it everybody's problem

Many entities, such as education, health and social services, business and voluntary organisations, agencies committed to health promotion and to reducing stigma, have a role to play. Through their ordinary everyday encounters, friends, colleagues and loved ones are often the first to become aware of crises arising in their immediate circle and have an equally important role in engaging sensitively with emotional distress.

People care

Many groups, bodies, foundations, and organisations have emerged in response to the intense concern generated by suicidal behaviour, each with a committed view of how the problem should be tackled but often unaware that the very initiatives they are undertaking are already in place somewhere else, sometimes in their own community. While these initiatives are often the impetus for community and health service innovations and developments, it is important that possibilities for mutual awareness and support be created across society.



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President Mary McAleese expresses her personal concern

On March 2nd, 2005, the President of Ireland, Mary McAleese, hosted a one-day Forum of individuals, groups and organisations furthering suicide prevention in Ireland at Áras an Uachtaráin, as an expression of her personal concern for this problem in Ireland and her continuing commitment to moving closer to the real experiences of the community. The purpose of the day was to acknowledge the importance of the significant work being undertaken by many diverse individuals and agencies, and to offer a meeting place where they might explore together how their efforts could be integrated and co-ordinated.

The invited participants included representatives of statutory agencies, voluntary organisations, and community-based initiatives for those bereaved by suicide, from Ireland, North and South, reflecting the need for a multifaceted approach to preventing suicidal behaviour. A panel of speakers addressed the Forum's theme of achieving integration and partnership on the issue. President McAleese followed the presentations and spoke about her deep concern for a serious problem that touches every corner of our society. She affirmed the importance of the work being undertaken by those present, and urged the group to find effective ways of supporting each other and combining their energies, talents and resources.

In her address to the Forum, President McAleese reflected that, in many ways, the current state of limited understanding and fragmentation of

initiatives is understandable. She encouraged participants to harness the sense of frustration and urgency that they felt in the face of disturbing statistics, and to work collectively to address this problem at its roots in our society.

At this point in the proceedings, the President took her leave of the Forum. In response to her invitation to continue the dialogue, the participants came together to work in small groups. The main theme to emerge from these discussions was the need for structures to co-ordinate and rationalise the work currently being undertaken and to establish visible leadership for these efforts. The Forum concluded with a commitment from the organisers to collate the proceedings of the meeting in a report to the President, which in turn would be circulated to all who were present.

Unique opportunity to move forward

The current climate within Ireland arising from recent Health Services reforms, the development of a National Strategy for Action on Suicide Prevention and the new policy framework being formulated by the Mental Health Expert Group, provide us with a unique opportunity. We can now consider afresh ways of working together to propagate a deeper understanding of suicide, to promote positive coping strategies, a greater sense of belonging and well-being within our communities.

Suicidal behaviour and the veil of secrecy that



surrounded it have only been open to searching dialogue and exploration since suicide was decriminalised in 1993. However, attitudes to emotional suffering and suicidal behaviour remain shrouded in fear, and many feel helpless in knowing how to respond. Bringing about fundamental changes in the way society and those in the helping professions think about suicidal behaviour, with openness to embrace, support and maintain new approaches, is part of the challenge of a national integrated suicide prevention initiative.

What the Forum agreed

In Ireland, we have just begun to invest energy and resources in research projects and services in respect of those who engage in suicidal behaviour and those who have been bereaved by suicide. We need to use the limited resources to link our work together and construct a strong web that will operate across every community, interacting with people at different phases of their distress. Each speaker spoke of the need for greater co-operation and co-ordination and emphasised how vital it is that groups and agencies view one another as allies and supports. The following points were emphasised in presentations:

Mental health promotion and early intervention

The promotion of positive mental health strategies throughout our community is fundamental to suicide prevention.

Education settings have a critical role to play in promoting mental health and coping skills, through the Social, Personal and Health Education (SPHE) programme and other school experiences. Early intervention can be achieved through training and supporting staff, particularly those providing counselling services, who are likely to encounter students in different stages of emotional distress. To respond to the increasing number of adolescents who engage in self-harm and suicidal behaviour, it was emphasised that improved linkages between education and health agencies are crucial.

Mental health services need to be user-friendly and supportive, and offer comprehensive and expert help “out of hours”. For known high-risk groups in the community – particularly those with diagnoses of severe depression and psychosis – early intervention requires improved links between primary care and specialist mental health care services.

Greater research response 'The knowledge gap'

Greater integration and co-ordination are required in the area of research so that we can understand more deeply the personal and social circumstances that lead to suicidal behaviour in this country. There is often difficulty moving from awareness and knowledge to implementation of practices that have been shown to be helpful. To ensure that positive practices are implemented throughout our health service, the need to establish some means of auditing and refining our existing health service

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practices was highlighted. Without dialogue and co-ordination, many significant research reports are left sitting on shelves, as researchers move on to seeking funding for their next project, and services are deprived of insights and strategies that could greatly benefit service users.

Listening and responding to 'the bad patch'

The fundamental principle of encouraging genuine personal communication and listening in our encounters with each other, and in particular with those who, in the words of the President, “are going through a bad patch” was emphasised. We need as a society to develop a greater appreciation of the healing potential of listening to, and supporting, those in distress and those bereaved by suicide. Whatever initiatives are established, it is of the greatest importance that they are person-centred and take account of the resources and wisdom that already exist within the community.

Leadership across communities

The absence of a formal national mental health leadership, authority or agency has often left communities and agencies with the feeling that “no one cares” and that any action is “up to them”, and that there is no overall plan, strategy or structure to tackle this great tragedy.

Visible leadership is required to rationalise the development of best practice guidelines for schools, work settings, and health services in a cost-effective



and standardised way. Frequently, it is communities themselves who take the lead in setting up novel local responses to care for their own. However, a problem arises when different groups continue to mushroom in isolation from others, without adequate sharing of their acquired experience, support, and training.

A Way Forward

The challenge for suicide prevention in Ireland is to harness the skills, passion, and energies of those



involved in current initiatives, including those under the auspices of various Government departments, and to increase our understanding of suicide, as a society. We must hear the voices of those who have grappled with the issue of suicide and ensure that their experience informs our efforts.

Too often, whenever integration and partnership have been attempted in any complex endeavour, it has been the case that individual representatives remain so wedded to their own particular agendas that there is no real “joining of minds”. The interests of those whom we claim to serve are relegated to a

place of secondary importance. So many committees are, in the words of the President, ‘quilt patch’ members who are not ‘stitched together’.

Effective strategic partnerships begin with bringing together key players in the topic area through a non-threatening, non-domineering invitation to participate. The different support needs of partners (including financial support that does not undermine independence) need to be considered and accommodated. What is important is that any partnership body be inclusive and mutually respectful of the unique expertise that each stakeholder can contribute.

An appropriate ethos is required to foster open dialogue and debate regarding the nature of the problems being addressed. In an atmosphere of trust and mutual respect, creative strategies can evolve and be co-ordinated which take account of the complexity of the challenge being confronted and address its specific inter-related components in practical ways.

To take this work forward, various models of integration and partnership were explored. The consensus among the Forum members was that a structure should be developed which would extend beyond the concern of any one Government department, and be inclusive of the broad range of stakeholders who have a key role to play in responding to local and all-Ireland community needs. Such a co-ordinating structure would build on the learning from the President’s forum and might best be developed on the basis of a Social Partnership model.



Summary

Speakers and discussion groups were asked to highlight key action strategies that might be undertaken in the immediate future to harness the collective desire for integration and partnership and to move forward the work of suicide prevention. The specific recommendations made by speakers and working groups were as follows:

- *Complete, publish, and implement as a matter of priority, the National Strategy for Action on Suicide Prevention*
- *Move towards creating a co-ordinating structure within the Social Partnership model*
- *Establish a leadership structure linked to government to co-ordinate, resource and administer the work of suicide prevention*
- *Support community groups and voluntary agencies in forming linkages and arriving at a greater mutual awareness*
- *Develop and resource safe, accessible and user-friendly mental health services where relevant expertise is available on a 24/7 basis*
- *Support research into the range of issues across society that contribute to suicidal behaviour*
- *Consider a major media campaign to promote positive mental and emotional health and challenge the stigma surrounding mental distress*
- *Request President McAleese to host a further meeting of the Forum in the future, where stakeholders could report back on progress that has been made in relation to forming effective strategic alliances and partnerships*

Dr Tony Bates

Rapporteur for the Forum on Integration and Partnership
